

SECRETARY OF STATE
STATE OF MONTANA



Linda McCulloch
Secretary of State

Montana State Capitol
PO Box 202801
Helena, MT 59620-2801

Re:

Enclosed please find a reinstatement packet. You will need to file an application for reinstatement, any back annual reports, and a Title 15 tax clearance certificate, to bring your corporation back in compliance with state statutes. The statement of change form is **only necessary** if you have changed your registered agent and/or registered address. There is no charge for a statement of change. Also, if you had any **Assumed Business Names/dba's** for your corporation, you will need to complete a new registration for them, because they were canceled at the time of your dissolution. Please fill out all forms included and return to the Secretary of State at the above address.

YOUR COST FOR REINSTATEMENT

Filing fee for Reinstatement \$ _____

Filing fee for Annual Reports (for years marked)

_____ 2004 (\$30.00)	_____ 2007 (\$30.00)
_____ 2005 (\$30.00)	_____ 2008 (\$30.00)
_____ 2006 (\$30.00)	_____ 2009 (\$15.00 if before April 15 th \$30.00 after April 15th)

Total for Annual Reports \$ _____

Total for Reinstatement \$ _____

A **Title 15 Tax Clearance** certificate must be obtained **from** the Department of Revenue. We have enclosed instructions and a request form for obtaining the certificate. You must include **BOTH** the original and copy of the Title 15 Certificate with your reinstatement packet.

If you have any further questions, please give us a call.

Reception: (406) 444-2034 - Business Services Bureau: 444-3665 - Elections Bureau: 444-4732
Administrative Rules Bureau: 444-2055 - Records Management Bureau (1320 Bozeman Avenue): 444-9000
Fax: 444-3976 <http://sos.mt.gov>

STATE OF MONTANA

Prepare, sign, submit with an original signature and filing fee.

This is the minimum information required.

REINSTATEMENT or REVIVER
for DOMESTIC or FOREIGN LIMITED LIABILITY COMPANY
APPLICATION

MAIL: **LINDA McCULLOCH**
Secretary of State
P.O. Box 202801
Helena, MT 59620-2801

PHONE: (406) 444-3665
FAX: (406) 444-3976
WEB SITE: sos.mt.gov



(This space for use by the Secretary of State only)

Filing Fee: Varies (see below)

- ☐ 24 Hour Priority Filing Add \$20.00
- ☐ 1 Hour Expedite Filing Add \$100.00

PLEASE CHECK ONE BOX:

- ☐ Domestic Reviver ([15-31-524, MCA](#)) \$15.00
- ☐ Foreign Reviver ([15-31-524, MCA](#)) \$15.00
- ☐ Domestic Reinstatement ([35-8-210, MCA](#)) \$35.00

1. The exact name of the limited liability company is:

2. The assets of the limited liability company have not been liquidated pursuant to [35-8-210, MCA](#).

3. Not less than a majority of its members have authorized this Application of Reinstatement/Reviver.

4. If the limited liability company name has been legally acquired by another corporation prior to its Application for Reinstatement, the limited liability company desires to be reinstated with the new name of

5. **For Domestic or Foreign Reviver:** The limited liability company submits with this application a Certificate of Reinstatement of Suspended Limited Liability Company obtained from the Department of Revenue evidencing payment of delinquent taxes.

6. **For Domestic Reinstatement** (mark only one)

- ☐ The domestic limited liability company is taxed as a **partnership**. Therefore, a Title 15 Certificate from the Montana Department of Revenue is not required.
- ☐ The domestic limited liability company is taxed as a **corporation**. Attached is a Title 15 Certificate from the Montana Department of Revenue.
- ☐ The domestic limited liability company is taxed as a **sole proprietorship**. Attached is a Title 15 Certificate from the Montana Department of Revenue.

I, HEREBY SWEAR AND AFFIRM, under penalty of law, that the facts contained in this Application are true.

Signature of Member/Manager

Date (Mo/Day/Year)

GENERAL INSTRUCTIONS

Please type or print clearly when filling out this form.

ALL INFORMATION PUBLIC

All information provided, including names and addresses of officers and directors, will be made available on the Secretary of State's web site or upon request.

LEGAL AND ACCOUNTING IMPLICATIONS

There are important legal and accounting implications with respect to this corporation action. Suitable legal and accounting advice should be secured before submission. The Secretary of State's office suggests that such advice be sought prior to filling out forms to be sure that you understand the terms and procedures.

FORM PROCESSING TIME

Please be advised that the Business Services Bureau of the Montana Secretary of State will process your business documents within 10 working days of initial receipt.

- During this period if it is determined that your document does not meet statutory requirements, a letter outlining the deficiencies will be returned to the original submitter.
- If the document is complete and correct, the document will be filed and an acknowledgment copy showing completion returned to the original submitter.

PRIORITY FILING

- You may request 24 hour priority filing of your document by simply marking the "24 hour priority filing" box and include an additional \$20.00 with your filing fee.
- You may request 1 hour expedite filing of your document by marking the "1 hour priority filing" box and including an additional \$100.00 with your filing fee.

SUBMISSION

Make checks payable to the Secretary of State. Upon completion, mail with ORIGINAL SIGNATURE to:

Secretary of State
PO Box 202801
Helena, MT 59620-2801

CONTACT US

If you have any questions regarding this form, please contact the Secretary of State Business Services at (406) 444-3665.